DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 100110627-1

FOR PATENT APPLICATION

As a below named inventor, I hereby declare that: My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first

residence/post office	l first s	and sole inventor (if on	ly one name is list	ed be	is claimed	and for which	:h	
elieve I am the original point inventor (if plus patent is sought on the contract of the contr	nai, ilisi d ural names ne inventis	and sole inventor (if on a are listed below) of the on entitled:	ne subject matt r w	FIN I	DATA LAY	'ER		
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e specification of wh	nich is atta	as US Applic and was amended	etion No. or PCT In	terna	tional App	ication		
/) was filed on		as US Applic and was amended	ation No. or i or	(if applicab	le).		
							on,	
Multipol	rovio	and was amended wed and understood t ed by any amendment(material to patentabilit	he contents of the	abov	e-luentine acknowled	ae the duty	to	
nereby state that I r	nave revie	ed by any amendment(s) referred to above	CFR 1	.56.	-5		
cluding the claims, c	which is	ed by any amendment(material to patentabilit	y as defined in ov	• • • •				
	Orales of E	oreign Priority		_		tion(s) for pater	it or	
reign Application(s) and/o	the banafits	oreign Priority under Title 35, United State have also identified below ar	s Code Section 119 of	any to naten	reign applice t or inventor	s) certificate ha	ving	
nereby claim foreign prior	below and	under Title 35, United State have also identified below ar on on which priority is claim	ny foreign application for	расси.				
ventor(s) certificate listor	the application	on on which priority is claim	eu.			UNDER 35 U.S.C. 11	19	
		APPLICATION NUMBER	DATE FILED	PRI	ORITY CLAIMED			
COUNTRY				1	YES:	NO:		
					YES:	NO:		
rovisional Application			any Unite	d Stat	es provisiona	I application(s)	liste	
hereby claim the benefit	under Title	35, United States Code Sec	(1011 1 15(6) 61 611)					
elow:			FILING DATE					
		APPLICATION NUMBER	TIEMO DATO					
				- 1				
nformation as defined in application and the natior	Title 37, Con nal or PCT in	of the claims of this applica of the claims of this applica of fitle 35, United States de of Federal Regulations, Se ternational filing date of this	application:					
APPLICATION NUM	IBER	FILING DATE	STATU	STATUS (patented/pending/abandoned)				
		<u> </u>						
POWER OF ATTORNEY:		pint the following attorney(s	s) and/or agent(s) to po	rosecut	e this applic	ation and trans	act	
As a named inventor, I	hereby app	Office connected therewith);					
business in the Patent at	10 1100011101		Place Customer	7				
Custo	mer Numbe	r 022879	Number Bar Code Label here	·				
0000		L						
Send Correspondence	e to:		Direct Telep	phone (Calls 10:			
I LIEW ETT.PACKARI	COMPANY		Trueman H	Trueman H. Denny III				
Intellectual Property Administration					-			
P.O. Box 272400 Fort Collins, Colorado 80527-2400			(650)857-	(650)857-3870				
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made on information	on and D	ements made herein of elief are believed to be villful false statements r Section 1001 of Title dize the validity of the	s and the like so	made	e are pui	nd that such	m ine wi	
imprisonment, or t	nav jeopar	r Section 1001 of Title dize the validity of the	application or any p	atent	เธรนชน เก	J. 3011.		
			Citizenship	: บร				
Full Name of Inventor:	Janice H. Nickel							
Residence:		mberly Dr., Sunnyvale,	California 94087					
Post Office Address:	Same as	residence		π -	100			

Date Page 1 of 7 on Two Ear Additional Inventorial Signaturaless

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 100110627-1

Full Name of # 2 joint inventor:	: Manoj Bhattacharyya	Citizenship: India					
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Residence: Post Office Address:	Sam as r sidence						
Inventor's Signature	Tachange	Date /12/02					
Full Name of # 3 joint inventor	:	Citizenship:					
Residence:							
Post Office Address:							
Inventor's Signature		Date					
Full Name of # 4 joint inventor	r:	Citizenship:					
Residence:							
Post Office Address:							
Inventor's Signature	-	Date					
Full Name of # 5 joint invento	r:	Citizenship:					
Residence:							
Post Office Address:							
Inventor's Signature		Date					
Full Name of # 6 joint invento	or:	Citizenship:					
Residence:							
Post Office Address:							
Inventor's Signature		Date					
Full Name of # 7 joint invento	or:	Citizenship:					
Residence:							
Post Office Address:							
Inventor's Signature		Date					
Full Name of # 8 joint inventor	or:	Citizenship:					
Residence:							
Post Office Address:							
Inventor's Signature		Date					